PRINT Print Help? State of Nevada CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT **Sun Valley General Improvement District** Margaret Reinhardt District (if applicable) Office (if applicable) Name (print) 674-6446 530 E 7th Ave, Sun Valley, NV, 89433 Telephone No. Mailing Address (include city and zip code) emall@gbis.com E-Mail Address NONPROFIT CORP ✓ CANDIDATE PAC POL PRTY IND EXP Select Appropriate Box(es) LEGAL DEFENSE FUND **AMENDED** Annual Filing - Due January 15, 2008 Period: Jan 01, 2007 - Dec 31, 2007 FILE Report #1 - Due August 05, 2008\* Oct 18 2008 Period: Jan 01, 2008 - Jul 31, 2008 Report #2 - Due October 28, 2008\* Period: Aug 01, 2008 - Oct 23, 2008 **ROSS MILLER** Report #3 - Due January 15, 2009\*/\*\* SECRETARY OF STATE Period: Oct 24, 2008 - Dec 31, 2008 Annual Filing - Due January 15, 2009 FOR OFFICE USE ONLY Period: Jan 01, 2008 - Dec 31, 2008 \* These Reports are filed by incumbents/candidates running for office in the 2008 election cycle \*\* Third Report suffices for 2009 Annual Filing if candidate also filed Report Nos. 1 and 2 Cumulative From Beginning of Report Period #1 This Period CONTRIBUTIONS SUMMARY through End of This Reporting Period 1. Total Monetary Contributions Received in Excess of \$100 \$ 0.00 \$ 0.00 (See page 2 of instruction sheet) 2. Total Monetary Contributions Received of \$100 or Less \$ 0.00 \$0.00 (See page 2 of instruction sheet) 3. Total Monetary Contributions in the form of loans guaranteed by a third \$ 0.00 \$0.00 party. (See page 2 of instruction sheet) 4. Total Monetary Contributions in the form of loans that were forgiven \$ 0.00 \$0.00 (See page 2 of instruction sheet) 5. Total Amount of Monetary Contributions Received \$ 0.00 \$0.00 (Add Lines 1 through 4) (See page 2 of instruction sheet) 6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) \$ 0.00 \$0.00 (See page 2 of instruction sheet) 7. Total Value of In Kind Contributions Received in \$ 0.00 \$0.00 Excess of \$100 (See page 2 of instruction sheet) **EXPENSES SUMMARY** Total Monetary Expenses Paid in Excess of \$100 \$ 700.00 \$700.00 (See page 2 of instruction sheet) 9. Total Monetary Expenses Paid of \$100 or Less \$ 50.00 \$50.00 (See page 3 of instruction sheet) 10. Total Amount of All Monetary Expenses Paid \$ 750.00 \$750.00 (Add Lines 8 and 9) (See page 3 of instruction sheet) 11. Total Value of In Kind Expenses in Excess \$ 0.00 \$0.00 of \$100 (See page 3 of instruction sheet) 12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection) \$ 0.00 (See page 3 of instruction sheet) **AFFIRMATION** 

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Margaret Reinhardt			10/18	3/2008	
Signature			Date		
CAMPAIGN CONTRIBUTIONS					Report Period # 2
Margaret Reinhardt Name (print)	Sun Valley G Office (if applic	eneral Improveme	nt District	District (if a	pplicable)
Contributions in I	Excess of \$100 or V	When Added Togeth paign Contributions	er from One to Line 1 o	e Contributor Exce	eds \$100
CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3rd PARTY IF LOAN GUARANTEED BY 3rd PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN IF DIFFERENT THAN CONTRIBUTOR
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Campaign Contributions and Expe	penses Report - Secretary of State of Nevad
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WRITTEN C	OMMITMENTS
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Report Period # 2

**Margaret Reinhardt** Name (print)

**Sun Valley General Improvement District** 

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT

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Report Period # 2

**Margaret Reinhardt** 

Sun Valley General Improvement District

Name (print)

Office (if applicable)

District (if applicable)

## **Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н

** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J

#### **CAMPAIGN EXPENSES**

Report Period # 2

Margaret Reinhardt Name (print)

**Sun Valley General Improvement District** 

Office (if applicable)

District (if applicable)

### Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Margaret Reinhardt 530 East 7th Ave Sun Valley, NV 89433	D	08/25/2008	\$700.00

This page may be copied or duplicated if additional space is needed.

<sup>\*\*</sup> NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

## IN KIND CONTRIBUTIONS AND EXPENSES REPORT

## IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

**Examples of in kind contributions:** (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

**Example of in kind expenses:** (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

	Report Period # 2
Sun Valley General Improvement	District
Office (if applicable)	District (if applicable)
	Sun Valley General Improvement I Office (if applicable)

## IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3rd PARTY IF LOAN GUARANTEED BY 3rd PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN

IN KIND WRITTEN COMMITMENTS		Report Period #	
Margaret Reinhardt	Sun Valley General Improvement	District	
Name (print)	Office (if applicable)	District (if applicable)	

Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT

IN KIND	CAMPAIGN
<b>EXPENS</b>	FS

Report Period # 2

**Margaret Reinhardt** 

Sun Valley General Improvement District

Name (print)

Office (if applicable)

District (if applicable)

## IN KIND

# Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR	DESCRIPTION OF EACH IN KIND	DATE OF EACH IN KIND	VALUE OR COST OF EACH IN KIND
SERVICE(S)	EXPENSE	EXPENSE	EXPENSE
	6 70 123		

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362